

Michael E. DeBakey VA Medical Center Houston, Texas

Psychology Internship Program



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Psychology Internship Program

Department of Veterans Affairs

Michael E. DeBakey VA Medical Center (MEDVAMC)

Psychology Training Director
Ellen J. Teng, Ph.D.
(713) 578-5513
Ellen.Teng@va.gov

Assistant Training Director
Ashley Clinton, Ph.D.
(713) 791-1414 ext. 24602
Ashley.Clinton@va.gov



Training Website:

http://www.houston.va.gov/Education/Psychology_Internship_and_Postdoctoral_Fellowship/Psychology_Internship_and_Postdoctoral_Fellowship.asp

APPLICATIONS DUE: NOVEMBER 2, 2015

APPIC Program Numbers: General Track (158311), Neuropsychology Track (158312)

Accreditation Status

The psychology internship at the **Michael E. DeBakey VA Medical Center (MEDVAMC)** is fully accredited by the Commission on Accreditation (CoA) of the American Psychological Association (APA). The MEDVAMC Psychology Training Program subscribes fully to the guidelines and principles set forth by the APA. The APA Code of Ethics provides another important guiding structure for our professional conduct.

The APA CoA can be reached at: 750 First Street NE, Washington, DC 20002-4242; Telephone: 800-374-2721; 202-336-5979; TDD/TTY: 202-336-6123. The next site visit will be during the academic year 2017.

APPIC Member Status

The internship at MEDVAMC is an APPIC member program. **Contact APPIC Central Office at 17225 El Camino Real, Suite #170, Houston TX 77058, email at appic@appic.org, Phone: 832.284.4080 Fax: 832.284.4079**

Internship Program Overview

INTRODUCTION

The Michael E. DeBakey Veterans Affairs Medical Center (MEDVAMC) is a 500 bed General Medical and Surgical Hospital. This new state-of-the-art facility is a teaching hospital affiliated with Baylor College of Medicine, which is part of the Texas Medical Center, the largest medical complex in the nation. Approximately 50 of the beds are assigned to the Mental Health Care Line, the remainder being devoted to Medicine, Surgery, Spinal Cord Injury, and Physical Medicine & Rehabilitation. Most Veterans are treated on an outpatient basis.

A wide variety of training programs are conducted within the hospital. Interns at this institution will be in a setting that provides a high degree of intellectual stimulation. Some of the training programs included at MEDVAMC are: medical intern and residency assignments; internships and/or residencies in dentistry, dietetics, hospital administration, and pharmacy; and affiliated traineeship in audiology and speech pathology, occupational, manual arts, kinesiotherapies and social arts, social work, and nursing.

The MEDVAMC sponsors hospital-wide programs to increase awareness and understanding of culturally diverse populations. The Multicultural Diversity Subcommittee (MDSC) of the Psychology Training Program develops stimulating didactic/experiential training opportunities that are informed by the empirical literature for psychology trainees. Professional development seminars and workshops (e.g., preparing for licensure, applying for post-docs and jobs) are timed throughout the year in accordance with the developmental milestones expected during the training year. The MDSC also sponsors a Mentoring Program in which students may choose a staff or post-doc to provide mentoring for a broad range of issues throughout the year. The MEDVAMC has an active EEO Program and sponsors hospital-wide programs such as: Houston Hispanic Career Day Forum, Black and Hispanic Mentoring Programs, Cultural Diversity Training, and various celebrations and ethnic heritage programs.

Within the hospital, an active program of medical and clinical research is conducted that is designed to explore problems on all frontiers of medical science. Animal laboratories, special facilities for observation and study in the behavioral sciences, and clinical trial research in PTSD and other mental health issues are examples of the available opportunities for research.

The MEDVAMC has a small library with computerized links to a network of virtual library resources. The Jesse Jones Library located within the Texas Medical Center is equipped with reference books and current journals in the medical sciences, psychology, and other related

disciplines. Close proximity of the hospital to the Texas Medical Center, Rice University, University of Houston, and Texas Southern University provides easy access to the libraries and teaching facilities of these institutions.

Our Medical Center is conveniently located near a number of residential areas, and an excellent choice of affordable rental apartments or houses is available. Houston is often listed as one of the nation's most affordable cities to live in, with many urban attractions, museums, parks, zoo, and a vibrant and diverse restaurant scene. For sports aficionados, Houston hosts the Texans, Astros, Rockets, and Dynamo sports teams. Houston is also the home of the Johnson Space Center, NASA's mission control center of many space missions, including the Orion mission to Mars.

We currently have funded positions for nine pre-doctoral Interns (eight General Track and one Neuropsychology Track).

PSYCHOLOGY INTERNSHIP PROGRAM

The Psychology Practice at the MEDVAMC offers an internship for doctoral students in APA accredited graduate clinical and counseling psychology programs. The goal of the Psychology Internship Program is to prepare interns for the practice of professional psychology in a variety of settings with a particular emphasis on preparation for VA and other medical/institutional settings. Additional goals include teaching interns the skills for entry into the practice of professional psychology; the ability to integrate theory, scientific inquiry, empirical data, and practice; to contribute to the knowledge and practice of professional psychology; and obtain diverse training experiences to enhance their skills as broadly trained psychologists who can be effective in a variety of service delivery contexts.

It is our mission to assist interns, not only in the acquisition of a range of professional skills, but in the development of a professional identity and role. Our philosophy reflects a scientist-practitioner model with the goal of providing interns with the most up-to-date knowledge, skill, and interventions for a rapidly changing health care arena. Training is dedicated to a quest for scholarly inquiry and professional problem solving, with supervisors serving as role models for interns. Opportunities are also available for interns to participate in ongoing research or to initiate a research project. Interns have up to 4 hours/week of protected research time and are encouraged to engage in ongoing research activities within the hospital.

The patient population at the MEDVAMC is quite diverse, reflecting the rich diversity of Houston and the large catchment area of VISN 16. Patients come from various cultural, ethnic, and socioeconomic backgrounds, range from young to older adults, and have varied psychiatric and physical disabilities. The internship program seeks to help interns enhance their awareness, appreciation, and understanding of diversity issues as related to patient care, and provide interns with ample opportunities to work with patients from various backgrounds. Interns advance their skills in working effectively with diverse patient populations through training that includes: a wide selection of clinical rotations, different therapy formats, outpatient and inpatient clinical work, weekly training seminars, supervision, interdisciplinary staff meetings, case conferences, and regularly scheduled mental health and hospital-wide conferences.

The internship year begins July 24, 2016.

CONTACT INFORMATION

The Michael E. DeBakey VAMC psychology training faculty appreciates your interest in our training program and wishes you the best in your professional development in psychology. Please send general inquiries to: VHAHOUMHCLPsychologyTraining@va.gov. If you have further questions or comments, please contact the following individuals:

Ms. Gloria McCadden
Administrative Assistant
Psychology Training Program (116)
Michael E. DeBakey VA Medical Center
2002 Holcombe Blvd
Houston, TX 77030
Gloria.Mccadden@va.gov
(713) 791-1414 ext. 23594

Ellen Teng, PhD
Director, Psychology Training
E-mail: Ellen.Teng@va.gov
Telephone: (713) 578-5513

Ashley Clinton, PhD
Assistant Training Director
E-mail: Ashley.Clinton@va.gov
Telephone: (713) 791-1414 ext. 24602

Application Process

Eligibility

Qualifications for internship include: U.S. citizenship, as per nation-wide VA guidelines; applicants must be doctoral candidates (Ph.D. or Psy.D.) enrolled in an APA approved counseling or clinical psychology program; and have completed a minimum of 600 total practicum hours (500 therapy/intervention hours and 100 assessment hours). Our internship observes all of the rules and policies set by the Association of Psychology Postdoctoral and Internship Centers (APPIC). This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant. Current APPIC guidelines and applications are provided on the [APPIC website](#).*

Appointment is also contingent upon successfully passing standard federal employment screening (e.g., security background check, passing employment physical, electronic fingerprinting, etc.). Prior to starting, fellows are required to have immunizations (or proof of immunity) for measles, mumps, rubella, and varicella. The Federal Government requires that male applicants to VA positions who were born after 12/31/59 must sign a Pre-appointment Certification Statement for Selective Service Registration before they are employed. It is not necessary to submit this form with the application, but this form will need to be completed if you are selected for this internship.

Selection Process

All complete applications received by the deadline will be screened by the Psychology Training Committee, and approximately 40 applicants will be invited to interview. We seek applicants who have a solid foundation in assessment, intervention, and scientific inquiry. Specifically, applicants' experience with adult populations, familiarity with individual/group-based interventions, and scholarly pursuits in the form of scientific presentations and publications are considered. We also consider prior experience working in VA or medical settings. Overall, our selection criteria are based on a "goodness-of-fit" with our scientist-practitioner model, and we look for interns whose training and career goals match the training our program offers. All applicants will be informed of whether they will be invited for an interview no later than December 15th. The MEDVAMC is an Equal Opportunity Employer, and the Psychology Training Program is committed to ensuring a range of diversity among our trainees. We select candidates representing different kinds of ethnic/racial backgrounds, sexual orientations, disabilities, geographic locations, and theoretical orientations.

Interview Process

We encourage on-site interviews and typically do not conduct telephone interviews. Applicants with a disability who require accommodations for the application process or interview are encouraged to contact the Training Director to discuss their needs. We will make reasonable accommodations upon request. Interviews will span a half day, occurring either in the morning or afternoon. They will include a brief meeting and orientation with training leadership, interviews with three different psychology staff members, meeting with the current interns, and learning about various rotation opportunities from supervisors over lunch. Interviews will be conducted on **January 4th, 8th, 11th, and 15th, 2016**.

Application Procedures

A completed online AAPI (APPIC Application for Psychology Internships). Please clearly indicate in your cover letter if you are applying for the General track or the Neuropsychology track. As part of your application, please include letters of recommendation from three professionals familiar with your background (at least one must be from your academic advisor). We would like to hear from faculty members familiar with your academic preparation, as well as supervisors familiar with your clinical work. All application materials must be submitted through the online AAPI and received by **November 2nd**. No materials will be accepted by e-mail or US mail.

Position Information

The internship comprises a 12-month appointment offering 2080 hours of training. The current stipend is \$27,029 rendered in 26 bimonthly payments. Benefits include 10 federal holidays, plus sick and annual leave accrual totaling 26 days for the year and reasonably priced medical insurance. Interns also may have up to five paid days per year granted to attend relevant professional conferences and approved educational activities.

Psychology Internship

GENERAL TRACK

In order to meet our training goals involving appropriate breadth and depth of psychological service delivery expertise for the eight General Track interns, trainees are expected to select six half-time placements of four months duration each. These placements are designed on the basis of intern preferences, but with an eye towards achieving a balance of experiences. The intern will have a mix of outpatient and inpatient placements, along with a distribution of therapy, assessment, and consultation experiences. The intern is typically assigned to two concurrent half-time placements lasting four months each. The sequence of placements is sometimes determined by an intern's particular need for early placement in a content area where he/she may be seeking a later post-doctoral fellowship (e.g., Clinical Neuropsychology, Primary Care Mental Health). The following is an example of two of the possible training tracks.

Sample Track A		Sample Track B	
Rotation 1		Rotation 1	
Community Integration Program (CIP) – PRRC		50% PTSD Clinical Team	50%
CIP - Vocational Rehabilitation		50% Substance Dependence Treatment Program	50%
Rotation 2		Rotation 2	
Neuropsychology		50% General Mental Health Clinic	50%
Spinal Cord Injury		50% Mental Health Inpatient	50%
Rotation 3		Rotation 3	
Chronic Pain		50% Neuropsychology	50%
WISER		50% Primary Care-Mental Health	50%

NEUROPSYCHOLOGY TRACK

Our training goals for the Neuropsychology Track intern include providing appropriate breadth and depth of psychological service delivery expertise and preparing the neuropsychology intern to apply and be competitive for formal postdoctoral fellowship in clinical neuropsychology. In the interest of achieving these goals, the intern is expected to select three half-time placements in neuropsychology and three half-time placements outside of neuropsychology, each lasting four months. The Neuropsychology Track intern should expect to have one half-time neuropsychology placement during each of the four-month rotations. These placements are designed on the basis of intern preferences, but with an eye towards achieving a balance of

experiences in neuropsychology and general psychology. The intern will have a mix of outpatient and inpatient placements, which will provide experiences in assessment, therapy, and consultation. In addition to the training seminars provided to interns on the general track, training seminars of particular relevance to the Neuropsychology Track intern include brain cuttings, Neuropsychology Case Conference, and the Polytrauma Educational Series. The following is an example of two possible rotation schedules for a Neuropsychology Track intern.

Sample Rotation Schedule A	Sample Rotation Schedule B	
Rotation 1	Rotation 1	
Neurology Neuropsychology	50% PTSD Clinical Team	50%
CIP - Vocational Rehabilitation	50% MH Neuropsychology	50%
Rotation 2	Rotation 2	
MH Neuropsychology	50% ROVER	50%
Spinal Cord Injury	50% Neurology Neuropsychology	50%
Rotation 3	Rotation 3	
Polytrauma Neuropsychology	50% Behavioral Health	50%
Chronic Pain	50% MH Neuropsychology	50%

There are five full time neuropsychologists approved to provide training opportunities at the MEDVAMC (Jane Booth, Ph.D., ABPP, Robert Collins, Ph.D., ABPP, Brian Miller, Ph.D., Nicholas Pastorek, Ph.D., ABPP, Nick Wisdom, Ph.D., ABPP) and one part time neuropsychologist (Michele York, Ph.D., ABPP). The neuropsychology intern is assigned to a specific staff psychologist for professional supervision during each rotation. The neuropsychologists work in different care lines and are affiliated with the Epilepsy Center of Excellence and Parkinson's Disease Research and Clinical Center, thus providing interns access to extremely diverse clinical and research training experiences. The MEDVAMC has an APA specialty practice accredited postdoctoral fellowship in clinical neuropsychology that currently supports four fellows, while also providing training for graduate-level externs, with whom the neuropsychology intern will have opportunities to receive and provide supervised supervision. Patient populations served by neuropsychologists at the MEDVAMC typically include traumatic brain injury, various dementias and demyelinating disorders, seizure disorder, stroke, psychiatric disorders including severe mental illness, and movement disorders.

OPPORTUNITIES AND EXPECTATIONS FOR ALL INTERNS

There are a large number of psychologists at MEDVAMC. Hence interns will have an opportunity to gain exposure to varied theoretical orientations. Group and individual therapy opportunities are available and include treatment approaches such as CBT, group process,

interpersonal, psychodynamic and psychoeducation depending on the needs of the population served and the theoretical orientation and style of the individual supervisor. The MEDVAMC psychology internship has a close association with Baylor College of Medicine (BCM) and interns have the opportunity to participate in minor rotations (i.e., maximum of 4 hrs/week) offered through the BCM clinical psychology internship program (the number of available minors varies from year to year).

Each psychology intern is assigned to a specific staff psychologist for professional supervision during each rotation. These training assignments are rotated every four months so that the intern will gain experience in different treatment programs and with different supervisors. Each intern will have at least six rotations and six different supervisors. The interns are expected to progress from more intensive supervision at the beginning of the year to more autonomous functioning by the year's end.

There are a number of scheduled training seminars on clinical assessment, psychotherapy, diversity and professional issues. Other conferences, staff meetings, case presentations, and regular unit staffings are scheduled so that interns can attend. To facilitate further communication among the interns and between the interns and staff, the interns meet with the Director of Training each week to discuss professional development and matters relevant to training, including issues of concern to the interns. Approximately once a month MEDVAMC interns participate in special topic didactic opportunities with interns from other local internship programs. This affords the interns in the Houston area an opportunity to form a support network and discuss professional issues.

Interns are expected to demonstrate understanding and competence in the areas of diagnosis and assessment, effective interventions, consultation, evaluation of efficacy of interventions, and issues of cultural and individual diversity. Interns are expected to present assessment and therapy cases toward the end of the training year so that their competence can be formally evaluated.

On completion of each training assignment, supervisors evaluate the intern's performance during the preceding four months. Feedback on this evaluation and intern progress is discussed with supervisors. A written evaluation of progress in training is furnished to the intern's departmental Director of Training each rotation. Each intern is also asked to make an evaluation of the supervision received during the preceding rotation. At the end of the internship year each intern is asked to evaluate the internship experience during an exit interview.

Psychology Training Rotations

PRIMARY CARE – BEHAVIORAL MEDICINE

Primary Care-Mental Health (PC-MH)

Angelic Chaison, Ph.D.

The goal of this rotation is to provide interns an opportunity to increase proficiency in assessing and providing brief clinical services to a variety of Veterans in primary care (primarily Clinic 3). Trainees will be presented with a variety of cases with some emphasis on mild- to- moderate depression, anxiety, and/or alcohol/substance misuse, which are potentially co-morbid with health problems such as diabetes, chronic pain, and obesity. Opportunities exist for interns to (1) conduct diagnostic assessments for walk-in and/or scheduled patients referred by their primary care providers, (2) conduct short-term, brief individual therapy (typically cognitive-behavioral or solution focused) with the aim of transferring patients' care to their primary care providers as appropriate, (3) develop and/or co-facilitate various behavioral medicine psychotherapy groups (including interactive psychoeducational or cognitive-behavioral groups with a focus on anxiety, depression, and healthy lifestyles), and (4) collaborate with other professionals within primary care including mental health and general practice providers. Opportunities also exist for the intern to participate in program evaluation as well as ongoing education efforts for primary care providers regarding mental health services.

Primary Care Mental Health Integration / Health Services Research

Jeffrey A. Cully, Ph.D.

This rotation is designed to provide interested interns and fellows with applied research and clinical training opportunities in the area of primary care mental health and medical psychology (the application of psychological principles to medically ill patient populations). Interns electing this rotation will largely serve in the capacity of a research clinician with experiences ranging from the provision of direct clinical service (e.g. individual psychotherapy within the context of externally funded clinical research protocols), project oversight/design, patient recruitment, data management, and preparation of scientific manuscripts. Because interns will vary in their exposure and comfort with research, rotation goals and expectations will be based upon each student's individual interests and ongoing professional development. Although interns will be provided with authorship on submitted manuscripts, publications are not required for successful completion of the rotation.

The primary research emphasis for this rotation is on improving mental health care for depressed and/or anxious chronically ill patients. Current research projects range from observational studies (the prevalence and impact of mental health factors in chronic medical conditions) to manual-based psychotherapy intervention trials for Veterans with chronic medical conditions. Past projects have also included studies of mental health care in the VA specifically related to acute care for depression and adequacy of psychotherapy exposure in integrated health care settings.

Health Promotion Disease Prevention (HPDP) / Primary Care Administration Rotation

Daniel DeBrule, Ph.D., Health Behavior Coordinator

This rotation is supervised by the Health Behavior Coordinator, who works closely with various providers and administrators in primary care clinics and various care lines to deliver a variety of services and HPDP programs. The trainee will have the opportunity to select several opportunities from the three areas of HPDP involvement : clinical, research/evaluation, and administrative. Much of the rotation involves clinical opportunities, such as leading smoking cessation classes, leading MOVE (diet and exercise) classes, Motivational Interviewing/Patient communication consultation for providers/patients, Personalized Health Plan assessments, and

individual sessions for health behavior change. Research opportunities for smoking outcome, ecological momentary assessment of health and psychological data, and promotion of health behavior in the context of psychopathology will be offered. The trainee may also gain experience in administration of health psychology programs, HPDP committee involvement, Primary Care administration meetings, medical ethics consultation, employee wellness committee involvement, and HPDP outreach. The rotation may also entail training opportunities in community based outpatient clinics in the Houston VA catchment area. Motivational Interviewing skills, particularly those applied to Primary Care settings, and the smoking cessation/health behavior program will be heavily emphasized. The trainee will be able to conduct individual therapy sessions, group therapy sessions, and some assessments (for health behavior, stages of change, or personalized health planning) but will also devote a portion of time to administrative efforts, HPDP promotion, and program evaluation at the direction of the supervisor. This rotation will allow the trainee to understand the relationship of clinical/health psychology to medicine, nursing, and social work in a primary care setting. The trainee will also gain an understanding of how programs are developed, disseminated, revised, and evaluated based on existing hospital policy, Primary Care needs, and VA directives.

Integrated Primary Care-Mental Health Rotation

Paul Sloan, Ph.D.

This rotation allows interns the chance to assess and provide brief clinical services to a variety of Veterans based out of the primary care clinics (specifically Clinic 1). Trainees would be presented with a variety of cases with some emphasis on mild- to- moderate depression and/or anxiety that are potentially co-morbid with health problems such as diabetes, chronic pain, and obesity. Opportunities exist for interns to co-facilitate different behavioral medicine groups (including support and psychoeducational groups with a focus on coping with a variety of medical problems), conduct individual therapy, and collaborate with other professionals within primary care including mental health and general practice providers. One of the more unique aspects of this rotation is the focus on learning and implementing brief therapy, for instance, solution-focused therapy. The day/time for this 16 hour rotation can be flexible, but the primary supervisor spends half-time in compensation and pension. This rotation does not include experiences in compensation and pension. Flexibility depends upon the level of knowledge and independence for the trainee, although supervision is generally provided in a mentoring atmosphere with more independence coming later in the rotation.

Primary Care – Mental Health Integration (PC-MHI)

Vincent Tran, Ph.D.

This rotation entails assessment and the provision of brief clinical services to a variety of Veterans based out of the primary care clinics (particularly Clinic 1). Trainees will be presented with a variety of cases including mild- to- moderate depression, anxiety, and/or alcohol/substance misuse, which are potentially co-morbid with health problems such as diabetes, chronic pain, and obesity. Opportunities exist for trainees to conduct diagnostic assessments and provide treatment recommendations particularly for walk-in patients referred by their primary care providers; conduct short-term, brief individual therapy (often cognitive-behavioral or solution focused) with the aim of transferring patients' care to their primary care providers as appropriate; co-facilitate psychotherapy groups; collaborate with other professionals within primary care including mental health and general practice providers; and facilitate smooth linkages with specialty services as needed. Opportunities also exist for trainees to participate in program evaluation as well as ongoing education efforts for primary care providers regarding mental health services.

Chronic Pain

Jeffrey West, Ph.D.

This rotation involves training experiences in assessment and treatment for Veterans experiencing chronic pain. Direct involvements with a broad range of Veteran characteristics and pain etiologies will be assured. The trainee will gain experience in both individual and group assessment and intervention, including participation as co-leader in regular groups such as Initial Assessment for Pain Clinic, Fibromyalgia, Complex Pain Conditions, “Alumni Pain/Coping Lab” (i.e., for Veterans who have already participated in introductory level education and groups). An important facet of this training rotation involves regular interaction and treatment planning with a variety of disciplines and care line staff outside as well as inside Mental Health, including Anesthesia Pain Clinic and Physical Medicine & Rehabilitation. The rotation will offer education and exposure to ongoing developments in chronic pain assessment and treatment following the Stepped Care Model at regional and national VHA levels. In addition, the MH PC Complex Chronic Pain Program is committed to continual evidence-based development, expansion and improvement efforts. This affords options within rotations for significant training involvements in administrative and program development and evaluation activities related to chronic pain services and service delivery.

PRIMARY CARE – HEALTH PSYCHOLOGY

Spinal Cord Injury Care Line Psychological Services

Herb Ames, Ph.D. and Thomas Anderson, Ph.D.

This rotation occurs within the Spinal Cord Injury Care Line and centers on assessment, treatment planning, intervention, and consultative services in the treatment of a very heterogeneous mix of inpatient and outpatient veterans with spinal cord injuries or dysfunction (SCI/D) of varied anatomical levels and completeness. The rotation is in a rehabilitation context but also has elements of behavioral medicine, health psychology and generalist psychological practice. Assessment experiences include interview based, objective personality assessment, and neuropsychological screening. Neuropsychological and projective testing experiences are not routine but may be available based on trainee interests and veteran need. Intervention experiences may include individual, family and group contexts. Occasional crisis related assessments and interventions are components of the typical rotation. System competency (i.e. knowledge related to accessing needed general and specialty services) development is an important training objective. SCI Care Line service delivery focuses on reducing obstacles to recovery, mobilizing assets, and fostering optimal adaptation on the part of the veteran with SCI/D. Identifying and mitigating the negative effects of co-morbid cognitive/psychological limitations are major psychological roles. An overview of medical and pharmacological aspects of rehabilitative medicine will be gained through supervision and interactions with a range of other professionals on the SCI team. The supervisors have many years’ experience offering direct service delivery to a broad range of veterans as well as a long-term commitment to the evolving MEDVAMC Psychology Training program. Both have pragmatic and integrative orientations, an appreciation of empirical and conceptual bases of practice, and focus on individualized training. Dr. Ames has an emphasis in CBT approaches and is also privileged to provide neuropsychological assessments. Dr. Anderson has more Interpersonal and Psychodynamic emphases. Active research projects are underway (e.g., enhancing vocational functioning in the SCI population) with other opportunities also possible.

Primary Care Mental Health Integration—Health Psychology Focus

Dorothy Octavia Jackson, Ph.D.

This rotation is designed to provide interested trainees with clinical training opportunities in the area of primary care mental health, with an emphasis on health psychology cases. The Primary Care Mental Health Integration (PCMHI) program supports primary care providers in identifying

and treating patients with a variety of mental health diagnoses. This rotation will offer opportunities, where available, to focus on cases of mild-to-moderate mood and anxiety disorders with co-morbid health-related problems such as cardiovascular disease, pulmonary diseases, diabetes, and/or obesity. Interns will have the opportunity to provide evidence-based, time-limited individual therapy sessions in a fast-paced primary care setting. Opportunities may also exist for trainees to co-facilitate the following groups: 1) Health Behavior Change Class: a 6-week curriculum that integrates motivational interviewing, mindfulness, and general behavioral health strategies to help veterans set and reach specific health-related behavior changes or 2) Living with Chronic Health Conditions Class: a 6-week process-oriented group that primarily utilizes Acceptance and Commitment strategies to provide support around the emotional distress and lifestyle demands associated with living with a chronic health condition.

Health Psychology Minor Rotation in GMHC

Tara Steinberg, PhD

Trainees will be involved in the treatment of Veterans in the General Mental Health Clinic setting. The rotation will offer brief therapy utilizing empirically-based techniques to help Veterans cope with psychological factors impacting medical conditions that affect quality of life. Treatment will focus on reducing mild to moderate anxiety, depression, adjustment, substance/alcohol abuse and cognitive disorders, as well as interpersonal deficits and personality structures. Medical conditions include cardiovascular disease (i.e., stroke, CHF), diabetes, cancer, HIV, hepatitis C, chronic pain, metabolic and autoimmune disorders.

Infectious Diseases and Consult & Liaison Psychiatry

Tara Steinberg, Ph.D.

The HIV/HCV rotation provides training in Clinical Health Psychology using innovative models of care, including the Medical Home Model and Patient Aligned Care Team system. Trainees develop advanced skills in the Specialty Medical Clinics within Primary Care Mental Health Integration (PCMHI). Trainees will gain knowledge of theoretical models and empirical research related to the bio-behavioral etiology and epidemiology of co-morbid medical and psychiatric disorders, as well as evidence-based interventions for Veterans with these conditions. A special focus is on the application of these skills to infectious disease populations. There are opportunities to conduct brief bedside psychotherapy for Veterans in the medical inpatient units through the Consult & Liaison Psychiatry Service. Trainees will function in an interdisciplinary team setting and have opportunities to plan and coordinate activities with infectious disease providers, nurses, psychiatrists, social workers, and psychologists from other clinics. Trainees will gain knowledge in the assessment, diagnosis, and treatment of Veterans living with comorbid medical and psychiatric illnesses, in both individual and group settings, as well as within the context of a family or community. Trainees will have the opportunity to conduct evaluations and provide interventions to support surgical candidacy and other specialty medical procedures, including liver, bone marrow, kidney, heart, and lung transplant procedures, and implant procedures, as referred. Advanced training is also possible in the areas of Motivational Interviewing, Mindfulness, and Cognitive-Behavioral Therapy, with an emphasis on brief intervention modalities.

Women's Health Center

Alison C. Sweeney, Psy.D.

The Women's Health Center is a specialty primary care clinic at the Michael E. DeBakey VA Medical Center dedicated to providing a full range of high-quality, compassionate health care services to women Veterans in a comfortable and inviting environment. This rotation focuses on the delivery of gender-sensitive, trauma-informed mental health care in a co-located, integrated and collaborative model with primary care providers. Common mental health concerns addressed in the Women's Health Center include depression, anxiety, sexual trauma, combat trauma, intimate partner violence, sleep disruption, disordered eating, chronic pain, and

difficulties with chronic disease management. Trainees will have the opportunity to develop assessment, intervention, and consultation competencies through (1) conducting comprehensive psycho-diagnostic evaluations for both scheduled and walk-in patients (2) providing brief individual interventions within an evidence-based framework (3) co-facilitating group therapy interventions and (4) providing consultation and collaborating with primary care teams in the Women's Health Center.

Health Psychology Rotation

Kaki York, Ph.D.

This rotation allows interns the chance to participate in the assessment and treatment of behavioral medicine cases (pre-surgical evaluation for bariatric surgery, and liver, bone marrow and other transplants; development of behavioral contracts; and treatment to prepare patients to receive other medical interventions) as required. Opportunities exist for interns to conduct individual therapy, and collaborate with other professionals within medical and /or psychiatric teams. One of the more unique aspects of this rotation is the focus on learning and implementing brief, problem focused therapies in an integrated care context. Opportunities also exist for the trainee to participate in on-going research. Specific projects will be determined on an individual basis related to trainee skills and interests as well as the needs of the PC MH program. The day/time for this 8-16 hour rotation can be flexible but must include Friday if the trainee is interested in working with transplant patients. The rotation supervisor is the Associate Director for the General Mental Health clinic but also sits on the Health Promotion Disease Prevention and Cancer Committees as well as the Liver Transplant -Medical Review Board. However, flexibility depends upon the level of knowledge and independence of the trainee. Supervision is generally provided in a mentoring atmosphere with more independence coming later in the rotation.

Neuropsychology

Community Integration Program (CIP) - Neuropsychology Clinic

Jane Booth, Ph.D., ABPP-CN and Nicholas Wisdom, Ph.D., ABPP-CN

The Neuropsychology Clinic receives inpatient and outpatient referrals from all the Care Lines within MEDVAMC and satellite clinics, excluding Rehabilitation and Neurology, to include Mental Health, Primary Care, Spinal Cord Injury, General Medicine, and Long Term Care. Populations served include dementias (e.g., Alzheimer's, Vascular, Lewy Body, Frontotemporal Lobar Dementia), psychopathology, cerebrovascular disease, parkinsonism, substance abuse, ADHD, HIV, demyelinating diseases, toxic-metabolic, and brain tumor. In addition, capacity evaluations are routinely requested from various providers. Evaluations are tailored to individual patient needs and referral questions, using a flexible battery approach. The intern will have the opportunity to learn techniques of neuropsychological investigation and principles of interpretation and specific recommendations with regard to the functional and diagnostic significance of findings. It is understood that trainees have varying degrees of assessment experience/exposure to neurological populations and every effort will be made to address each trainee's individual needs or interests. Additional didactic opportunities are available including the MEDVAMC Neuropsychological Seminar Series, Houston Neuropsychological Society meetings and other relevant educational meetings. There may be opportunities to participate in ongoing research projects with the goal of generating a poster and/or publication.

Neuropsychology, Neurology Care Line

Robert Collins, Ph.D., ABPP-CN

The Clinical Neuropsychology Service within the Neurology Care Line primarily receives consultation through various neurology outpatient clinics (e.g., cognitive disorders clinic, stroke clinic, seizure clinic, etc.). Less frequently there are requests for inpatient evaluations, usually

for the purpose of addressing competency/limitations to independence. The patient population is typically older and the primary questions being asked are diagnostic in nature (e.g., differentiation of various dementias, cognitive disorders in the context of psychiatric illness, recovery of cognitive functioning following head injury or stroke, malingering, etc.). This service has direct involvement in the MEDVAMC epilepsy surgery program and there may be opportunities for interns to assist in the pre- and post-surgical evaluation of these patients as well as assisting with intracarotid amobarbital (e.g., WADA) studies. There may be opportunities to collaborate on research projects and to provide psychotherapy to patients with CNS disease and psychiatric illness. This is a rotation where the emphasis is on teaching the basics of neuropsychological assessment (including interviewing, test selection, interpretation of data, etc.) and exposure to different neurological/psychiatric populations. The assessment approach utilized on this rotation is one that is hypothesis driven to guide test selection with a flexible battery. Test findings are compared to normative data and interpreted within an information processing framework. It is understood that trainees have varying degrees of assessment experience/exposure to neurological populations and every effort will be made to individually tailor each training experience. Interns at all experience levels will be expected to complete readings in neuropsychology and to attend neuropsychology seminars. Interns will have an opportunity to work with the Clinical Neuropsychology Postdoctoral Fellows.

Neuropsychology Clinic and Polytrauma Network Site

Brian Miller, Ph.D.

The Neuropsychology Clinic receives inpatient and outpatient referrals from all the Care Lines within MEDVAMC and satellite clinics, excluding Rehabilitation/Extended and Neurology, to include Mental Health, Primary Care, Spinal Cord Injury, General Medicine, and Long Term Care. Populations served include dementias (e.g., Alzheimer's, Vascular, Lewy Body, Frontotemporal Lobar Dementia), psychopathology, cerebrovascular disease, parkinsonism, substance abuse, ADHD, HIV, demyelinating diseases, toxic-metabolic, and brain tumor. In addition, capacity evaluations are routinely requested from various providers. The neuropsychology service in the Polytrauma Network Site primarily provides outpatient assessment and treatment to Veterans with polytrauma from Operation Enduring Freedom/Operation Iraqi Freedom, referred from the Rehabilitation and Extended Care Line. These active duty soldiers and Veterans are typically in the post-acute stage of recovery from brain injury and often have suffered other injuries. Interns may have the opportunity to work with patients referred from both the Neuropsychology Clinic and Polytrauma Network Site over the course of a single rotation. Evaluations are tailored to individual patient needs and referral questions, using a flexible battery approach. The intern will have the opportunity to learn techniques of neuropsychological investigation and principles of interpretation and specific recommendations with regard to the functional and diagnostic significance of findings. It is understood that trainees have varying degrees of assessment experience/exposure to neurological populations and every effort will be made to address each trainee's individual needs or interests. Additional didactic opportunities are available including the MEDVAMC Neuropsychological Seminar Series, Houston Neuropsychological Society meetings and other relevant educational meetings. There may be opportunities to participate in ongoing research projects with the goal of generating a poster and/or publication.

Polytrauma Network Site

Nicholas Pastorek, Ph.D., ABPP-CN

The neuropsychology service in the Polytrauma Network Site primarily provides outpatient assessment and treatment to Veterans with polytrauma from Operation Enduring Freedom/Operation Iraqi Freedom. These active duty soldiers and Veterans are typically in the post-acute stage of recovery from brain injury and often have suffered other injuries. Assessment and treatment of the polytrauma survivors entails monitoring cognitive functioning through neuropsychological assessment, improving cognitive functioning and maximizing

independence through individual and group therapies, and facilitating psychological adjustment of the patients and caregivers through psycho-educational sessions. Consults are also routinely received from general inpatient rehabilitation clinics. Neuropsychological evaluation in this context is typically requested to assess competency and to make recommendations regarding assistance and supervision for older adult Veterans recovering from stroke or other acquired brain injuries. This is a rotation where the emphasis is on teaching the basics of neuropsychological assessment (including interviewing, test selection, test administration, interpretation of data, etc) and exposure to different neurological/psychiatric populations. Test selection is hypothesis driven and findings are compared to normative data and interpreted within an information processing framework. It is understood that trainees have varying degrees of assessment experience and exposure to neurological populations and every effort will be made to individually tailor each training experience. The experiences of trainees on this rotation may vary considerably depending on their familiarity with neuropsychological testing, availability, and goals. In general, it is expected that trainees will become reasonably proficient in administering, scoring, and interpreting test results within a neuropsychological framework by the end of the rotation. Trainees will also learn about the cognitive sequelae following brain damage, especially traumatic brain injury and stroke, and will become adept at using this knowledge to make functional recommendations and to educate the patients and their families. Trainees will also be expected to attend and to actively participate in neuropsychology seminars. Trainees may have the opportunity to work with extern students and to work under the guidance of the neuropsychology post-doctoral fellows.

Parkinson's Disease Research Education and Clinical Center (PADRECC)- Neuropsychology

Michele York, Ph.D., ABPP-CN

The Parkinson's Disease Research Education and Clinical Center (PADRECC) is one of 6 centers of excellence across the United States for the treatment of Parkinson's disease and other movement disorders. The Neuropsychology service in the PADRECC receives consultation through the three Movement disorder neurologists. The referrals are for differential diagnosis of dementia and to determine surgical candidacy for deep brain stimulation surgery for the treatment of essential tremor or Parkinson's disease. There may be opportunities to collaborate on research projects. In this rotation some experience with Neuropsychological assessment is a requirement due to the specific nature of the patient population being assessed. There is an opportunity for trainees to observe neurological evaluations for movement disorder patients, observe a deep brain stimulation surgery, and participate in interdisciplinary team meetings. Trainees will also be expected to attend and to actively participate in neuropsychology seminars.

COMPENSATION & PENSION

Compensation and Pension

Gregory Beaulieu, Ph.D., Valerie King, Ph.D., David Ramstad, Ph.D., Avila Steele, Ph.D., Compensation and Pension (C&P) Examinations are an integral step in the claims process through which Veterans may be awarded support services related to disabilities incurred or exacerbated by military service. While these supports most often center upon direct financial benefits, other supports include eligibility for medical services, specialized treatment programs, and in-home care for acute medical and mental health conditions. Mental health C&P examination requests typically require the psychologist to determine (1) if a Veteran currently meets DSM-5 criteria for a mental disorder and (2) the direct or indirect relationship between a Veteran's claimed mental disorder and their military service. Opinions may be requested as to whether a Veteran's claimed disability renders him/her unable to maintain gainful employment.

Examiners also conduct competency exams to determine whether veterans are able to manage VA funds in their own best interest.

Trainees on this rotation will gain exposure to all aspects of completing Compensation and Pension (C&P) Examinations. Trainees will be provided opportunities to review military treatment and personnel records, conduct chart reviews, conduct diagnostic clinical interviews, and write final reports. The role of C&P and its implications for approaching mental health through the recovery model will be addressed throughout the rotation. At the beginning of the rotation, trainees will complete online Compensation and Pension Examination Program (CPEP) certification courses. At the conclusion of this rotation, trainees will demonstrate a working knowledge of relevant legal statutes that guide the VA's Compensation and Pension system; competence in using structured clinical interviewing; and proficiency with differential diagnoses using DSM-5 criteria. Trainees will use VA's electronic CAPRI system to complete integrated reports.

GENERAL MENTAL HEALTH

General Mental Health Clinic – Posttraumatic Stress Disorder and Readjustment Issues Ashley Clinton, Ph.D.

This rotation focuses on treating Veterans with PTSD and related comorbidities, including readjustment issues. Interns will have opportunities to conduct mental health screenings and follow several Veterans for short term individual therapy. A main focus of the rotation will be on diagnostic assessment and treatment planning skills as well as short-term therapeutic interventions. Interns will also be able to participate in multidisciplinary treatment team activities.

General Mental Health Clinic – Mood Disorders Carrie Dodrill, PhD

Trainees will have the opportunity to gain experience with individual therapy, group psychotherapy (for Bipolar Disorder), treatment planning, and interdisciplinary team consultations. Patients in the General Mental Health Clinic may be diagnosed with a wide variety of issues and levels of functioning. The theoretical orientation of the supervisor combines Cognitive-Behavioral Therapy, Acceptance and Commitment Therapy, Motivational Interviewing, and Dialectical Behavior Therapy. Emerging interests include Narrative Psychotherapy and Positive Psychology. The rotation will be tailored to meet the individual needs and interests of the supervisee. This rotation is for a maximum of 8 hours per week.

Dialectical Behavior Therapy Charity Hammond, Ph.D.

Trainees involved in this rotation will have an opportunity to participate in a DBT program for Veterans in the Mental Health Care Line. Patients in this program either meet full criteria for Borderline Personality Disorder or have significant problems in emotional and behavioral regulation, including self-harm behavior, frequent hospitalizations, or high utilization of crisis services. The DBT program consists of individual therapy, skills group, phone coaching, and team consultation meetings. Depending on the length of the rotation and level of experience, trainees can be involved in some or all of those treatment modalities. Trainees can also become involved in assessments and program evaluation.

General Mental Health Clinic – Posttraumatic Stress Disorder/Substance Use Disorder treatment Charity Hammond, Ph.D

This rotation focuses on integrated dual diagnosis treatment of substance use problems and PTSD. Interns will have the opportunity to participate in group and individual therapy on inpatient and outpatient settings, working with clients in a variety of age groups, combat eras,

and stages of change regarding substance use. Patients seen will be part of the general mental health clinic, PTSD clinical team, substance dependence treatment program, and inpatient treatment program for OEF/OIF veterans. Clinical experiences include Seeking Safety treatment, Acceptance and Commitment therapy, Motivational Interviewing, and other cognitive-behavioral interventions including more trauma-focused treatments. Interns can also be involved in case consultations and assessments.

General Mental Health Clinic –Anxiety
Emily Hiatt, Ph.D.

This rotation is housed in the General Mental Health Clinic and offers opportunities to work with veterans with different anxiety disorders, including social anxiety, panic, generalized anxiety, specific phobias and posttraumatic stress, and related conditions. Trainees may gain experience providing individual therapy and participating in interdisciplinary team meetings.

General Mental Health Clinic
Chloe Hoang, Ph.D.

The GMHC rotation offers trainees experience in diagnostic interviewing, treatment planning, individual and group psychotherapy, and case conceptualization. In this rotation, the emphasis is on learning and applying evidence-based treatments, primarily Cognitive-Behavioral Therapy (CBT), Acceptance and Commitment Therapy (ACT), Dialectical Behavior Therapy (DBT), and Motivational Interviewing (MI) in group and individual treatment modality in an outpatient setting offered to veterans who struggle with emotion regulation, substance use problems, interpersonal relationships, and pervasive inflexible coping responses. By the end of the rotation, trainees will achieve the following learning objectives: (1) increase both skills and confidence in conducting descriptive and explanatory levels of case conceptualization and (2) gain both declarative and procedural knowledge in selecting and implementing conceptualization-based interventions in a culturally sensitive manner.

General Mental Health Clinic
Jennifer O’Neil, Ph.D.

The General Mental Health Clinic (GMHC) is an outpatient clinic that provides services to Veterans with affective, psychotic, anxiety, and cognitive disorders. A major goal of the programs in GMHC is to provide recovery-oriented care that helps Veterans achieve the highest possible level of functioning, productivity, independence, interpersonal effectiveness, and overall satisfaction with life. Interns will have the opportunity to participate in evidence-based, time-limited, group and individual therapy and psychosocial and psychological assessments. Interns have the opportunity to co-facilitate a 12 week Cognitive Behavioral Therapy for Depression group. Interns will also be able to participate in multidisciplinary treatment team activities and case consultations. If desired, the intern can tailor the rotation around the assessment and treatment of mood disorders with a special focus on learning evidence-based treatments such as Cognitive Behavioral Therapy and Interpersonal Therapy for Depression. Supervision is generally provided in a mentoring atmosphere with more independence coming later in the rotation.

TRAUMA & POSTTRAUMATIC STRESS DISORDER

Posttraumatic Stress Disorder (PTSD) Clinical Team
Minette Beckner, Ph.D., Nancy Jo Dunn, Ph.D., Lisa Robinson, Ph.D.,
Karin Thompson, Ph.D. Wright Williams, Ph.D.

This rotation affords the opportunity to work in a specialized assessment, consultation, and treatment program designed to address psychological trauma (e.g., combat trauma, military

sexual trauma) in veterans of all eras in an outpatient setting. The rotation offers a focus on evidence-based psychotherapy, including prolonged exposure therapy and cognitive processing therapy (applied in both group and individual psychotherapy formats) within the context of a multidisciplinary treatment team. Other opportunities may include cognitive-behavioral treatment of PTSD-related insomnia and nightmares, traumatic grief, coping skills, assessment/treatment planning, program development, and related research projects.

PTSD Clinical Team –Sexual Trauma

Emily Hiatt, Ph.D.

This rotation is housed in the PTSD specialty program and offers opportunities to work with veterans with histories of sexual trauma. Trainees may participate in the sexual trauma program, which is group-based and meets two days per week for three months. The program incorporates Cognitive Processing Therapy- Cognitive version along with other interventions (e.g., in vivo exposure). Within this program, trainees have the opportunity to facilitate the CPT-C group sessions, in vivo exposure sessions, and/or develop and teach about topic areas of their interest that would be relevant for individuals with history of sexual trauma (e.g., sleep, sexual functioning, interpersonal effectiveness, etc.).

Clinical Research in Posttraumatic Stress Disorder and Comorbid Anxiety Disorders

Ellen J. Teng, Ph.D.

This rotation provides a number of opportunities for interns to learn more about assessment, time-limited individual and group psychotherapy, and clinical research. Diagnostic clinical interviewing using standardized structured interviews such as the Structured Clinical Interview for DSM-IV (SCID), Anxiety Disorders Interview Schedule for DSM-IV (ADIS-IV), and Clinician Administered PTSD Scale (CAPS) is emphasized. Interns interested in applied clinical research will also have the opportunity to become involved in treatment outcome research that involves innovative methods of delivering cognitive behavioral therapy. Additional experiences in providing trauma-focused therapy using evidence-based approaches (e.g., Prolonged Exposure Therapy, Multiple Channel Exposure Therapy) are also available. Administrative experiences are also available in conducting program evaluation and participating in the management and organization of the Psychology Training Program.

SUBSTANCE DEPENDENCE

Substance Dependence Treatment Program

Jill K. McGavin, Ph.D.

The Substance Dependence Treatment Program (SDTP) is an outpatient program which helps Veterans recovery from addictions to alcohol and drugs (primarily cocaine, but also opioid and marijuana). In addition to addictions, many Veterans receiving treatment in SDTP also struggle with homelessness, unemployment, other mental illnesses, and medical and legal problems. Veterans are assessed using the Brief Addictions Monitor at the outset of treatment and the SDTP is moving towards measurement-based care for addictions. The major treatment modality of SDTP is group-based education on early recovery and relapse prevention skills using the MATRIX model of the Substance Abuse and Mental Health Services administration (SAMSHA). Support groups and a variety of specialty groups (Sober Seniors, Grief Group, Smoking Cessation, Coping Skills, Sexual Addiction, and others) are also available. Depending on their particular schedule, Interns have the opportunity to serve as co-leaders, and possibly leaders, of various groups as well as gain experience in individual therapy, psychological assessment, breathalyzer testing, treatment planning, discharge planning, and interdisciplinary treatment team meetings within SDTP and with community partners. The main training goal is to increase interns' knowledge base and comfort level in assessing and treating substance use disorders.

PSYCHOSOCIAL REHABILITATION & RECOVERY

Psychosocial Rehabilitation and Recovery Center (PRRC)

Amy Cuellar, Ph.D.

Trainees on this rotation will have the opportunity to learn how to deliver recovery-oriented services to a population with serious mental illness. Interns will learn the basics of psychiatric rehabilitation that focuses on helping Veterans achieve self-identified goals for recovery, better psychosocial functioning, and greater integration in their communities. Trainees will conduct screening assessments that focus on helping Veterans identify recovery goals, individual recovery coaching sessions to help them problem solve around goal achievement, and psychoeducational and skills-based groups, such as Social Skills Training for Schizophrenia, Illness Management & Recovery, and Wellness Recovery Action Plan development.

Psychosocial Rehabilitation and Recovery Center (PRRC)

Charlie Nguyen, Ph.D.

Trainees on this rotation will have the opportunity to learn about the Recovery Model of mental illness and deliver recovery-oriented services to Veterans with serious mental illness. Trainees will learn about the definitions, principles, and domains of “recovery” and the basics of psychiatric rehabilitation that focus on helping Veterans achieve self-identified goals for recovery, better psychosocial functioning, and greater integration in their communities. Trainees will conduct screening assessments that focus on helping Veterans identify recovery goals, individual recovery coaching sessions to help them problem solve around goal achievement, and psychoeducational and skills-based groups. Depending on their schedule, trainees will have the opportunity to participate in recovery practice activities and outings in the community.

INPATIENT & RESIDENTIAL TREATMENT

Geropsychology Inpatient Unit

Cynthia Kraus-Schuman, Ph.D.

This rotation involves working with veterans in an inpatient psychiatric setting. As the unit population permits, the focus of this rotation will be working with older adults and adults with dementia. Treatment teams on 6F are comprised of psychiatrists, social workers, physician assistants, and nursing staff. Interns on this rotation are expected to conduct groups, follow veterans for individual therapy, and attend multidisciplinary treatment team meetings. Other opportunities for this rotation may include participating in family meetings, administering dementia assessments, program development, and research. The dominant treatment modality on this rotation is Cognitive Behavioral Therapy.

Women's Inpatient Specialty Evaluation & Recovery Program (WISER)

Deleene Menefee, Ph.D.

The Women's Inpatient Specialty Environment of Recovery (WISER) rotation will provide psychology interns with a unique opportunity to work with women Veterans in a trauma-informed, intensive 4-week long inpatient program.. WISER provides comprehensive evaluation and intensive specialized treatment using evidence-based treatments, such as, Dialectical Behavior Therapy Skills, Cognitive Processing Therapy, and Seeking Safety. The intern will participate in the co-creation of the rotation goals. Interns have the opportunity to: attend treatment team rounds (multidisciplinary meeting with each individual patient on the unit lasting approximately 1.5 hours); co-facilitate and potentially lead a 1.5 hour process group each day; conduct individual psychotherapy specific to the individualized treatment plan of the Veteran; conduct and interpret psychological evaluations(mini-reports); participate in other evidence-

based groups such as Cognitive Processing Therapy, Seeking Safety, and DBT; and participate in research with IRB approved protocols for evaluation of clinical outcomes.

Acute Recovery Treatment Environment (ARTE) Inpatient Rotation

Justin Springer, Ph.D.

The Acute Recovery Treatment Environment (ARTE) Inpatient Rotation provides psychology interns exciting opportunities to develop professional skills on the MEDVAMC's primary, 32-bed acute psychiatric specialty unit. During Veteran hospitalization, the primary aims of the unit are to foster and support recovery journeys and to assist Veterans with successful, safe transition to outpatient services. The ARTE inpatient rotation offers trainees opportunities to engage in a variety of ongoing treatment and administrative activities related to delivery of evidence- and recovery-based services to Veterans on the ARTE unit. Clinical responsibilities include involvement in a multi-disciplinary team, treatment planning, development of recovery-based case conceptualization, best practice staff-Veteran interactions, and evidence-based group psychotherapy [e.g., SAMHSA toolkit implementation, CBT for psychosis (CBTp), DBT Skills, and Family Education, Social Skills Training, and Cognitive Rehabilitation]. Clinical opportunities include behavioral assessment, aggression prevention, team feedback, as well as individual psychotherapy consistent with the Veterans' individualized treatment plans and recovery objectives. Additional opportunities include assessment to support decision-making/track Veteran progress, Care Monitoring Meetings, and examination of relevant peer-reviewed literature to improve practices.

Returning OEF/OIF Veterans Environment of Recovery Program (ROVER)

Jill Wanner, Ph.D.

This 4-month rotation will provide psychology interns with a unique opportunity to work with male combat Veterans from the OEF/OIF era in a trauma-informed, intensive 4-week long inpatient program. This program will provide comprehensive evaluation and intensive specialized treatment using evidence-based treatments, such as, Dialectical Behavior Therapy Skills, Cognitive Processing Therapy, and Seeking Safety. ROVER Veterans typically have a diagnosis of PTSD, substance abuse (SUD), interpersonal difficulties and/or personality disorder. The intern can co-create the rotation goals. Interns will have the opportunity to: Attend Treatment Team Rounds (multidisciplinary meeting with each individual patient on the unit lasting approximately 2 hours); Participate in Treatment Team staffing where patient applications are reviewed for acceptance into the program; Co-facilitate and potentially lead a 1.5 hour process group each day; Conduct individual psychotherapy specific to the individualized treatment plan of the Veteran; Conduct and interpret psychological evaluations (mini-reports); Attend Patient Care Monitoring (Wednesday only); Participate in other evidence-based groups such as Cognitive Processing Therapy, Seeking Safety, and DBT; and participate in research opportunities with protocols for post-treatment evaluation.

ADDITIONAL EXPERIENCES

Sex Offender Group

Sara (Su) Bailey, Ph.D.

The intern on this rotation will co-lead a group for sex offenders who have been referred from the probation and parole departments. In conjunction with this population, the intern will be involved in the initial assessment of patients entering into the long-term outpatient sex offender group.

Clinical Research in Late-life Anxiety

Melinda Stanley, Ph.D.

A rotation is offered through the Houston Health Services Research and Development Center of Excellence that focuses on clinical research in late-life anxiety. Opportunities are available to participate in ongoing studies addressing the cognitive behavioral treatment (CBT) of generalized anxiety disorder (GAD) in older, primary care patients, the treatment of anxiety in patients with dementia, and the treatment of worry and anxiety in underserved, low income communities. The latter project offers participants the opportunity to integrate religion and/or spirituality into CBT. Training experiences can include participation in study recruitment, structured diagnostic and cognitive assessments, protocol-based treatment, data analysis, manuscript preparation, and grant writing. In addition to supervision provided by a licensed psychologist, supervision will also be available within a multi-disciplinary team including psychiatrists (Dr. Kunik), social workers (Ms. Wilson), biostatisticians (Drs. Rhoades, Khan), and internists (Drs. Masozera, Williams, Horsfield). Participants are from the MEDVAMC, Baylor clinics, and the community.